

Date _____

HOUSE NUMBER APPLICATION

Applicants Names:

Applicants Telephone Number:

Applicants Address:

Property Owners Name (if different than applicant):

Property Location

Municipality:

Computer Number:

Sec.	Town:	Range:	1/4	1/4	Govt Lt
Lot	Blk	Subdivision:			
Lot	CSM:				

IS THIS A REPLACEMENT SIGN ONLY? Yes _____ No _____

If your Driveway is on a **COUNTY** or **STATE ROAD**, you need to get a Highway permit **first** from the Adams County Highway Department! 339-3355 & Bring Copy with You

Please give driveway measurements from your lot lines:

FOR ADAMS COUNTY USE ONLY

Address assigned by: _____ Date assigned _____
Address put on Digital Map _____ Address on Computer _____
Address on paper map _____ Hwy Permit: _____ Yes _____ No
Notified Property Owners or Applicant by: Phone _____ Mail _____
In Person _____ Email _____

New Site Address:

Return to: Adams County Real Property Lister's Office Attn: Sue 608-339-4525
PO Box 470 Friendship, WI 53934 Email: stheisen@co.adams.wi.us